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(Requestor's Name)				
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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIRED	

FROM: James Schab

Name (Printed or typed)

700 West Venice Ave.

Address

Venice, Florida, 34285

City. State & Zip

941-484-8080

Daytime Telephone number

jimschab@gmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

<u>ARTICLE I - 7</u> The name of the c	<u>NAME</u> corporation shall be:_	AMERICAN	REALTY	RENTAL	COMPANY	INC.	
				<u>-</u>	· · · · · · · · · · · · · · · · · · ·	_	
AKTICLE II	PRINCIPAL OFFIQ Principal <u>stre</u>				Mailing addre	ess, if different is	ç
700 Wes	t Venice Av						
Venice,	_F134285_		_				· · ·
ARTICLE III I	PURPOSE						
The purpose for v	which the corporation	n is organized is: _	Rea1	<u>estate</u>	rentals,	sales.	and
propert	<u>y managemen</u>	+					
properc	<u>y managemen</u>						
-						<u>-</u>	
	ares of stock is:						
Name ar	nd Title: <u>James</u>	Schab/ Pre	sident	Name and T	itle:		
Address	700 We	st Venice	Ave.	Address:			
	Venice	, F1, 3428	5				
		7 1 2 4 5 1 2 0					
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Name an	d Title:			Name and T	itle:	<u>≱•¦;</u> ⊟ (_ಫ
Address	i			Address:		<u>`</u>	H
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Name an	d Title:			Name and T	itle:	198	28
						<u></u>	
Address				Address:			-
			-				

Name and	Title:	Name and Title:
Address		Address:
		
	<u>PEGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	James Schab	_
Address:	700 West Venice Ave.	- 2 : 3
,	<u>Venice, Fl. 34285</u>	
ADTICLE VIII - I	ACORDOR ITOR	FEB 27 PH 2: 28
	<u>NCORPORATOR</u>	
The name and add	dress of the Incorporator is:	7-10 2:
Name:	James Schab	- 28 - 28
Address:	700 West Venice Ave.	المستمر
	Venice, F1. 34285	_
ARTICLE VIII	EFFECTIVE DATE:	
Effective date, if c (If an effective da filing.)	other than the date of filing: ite is listed, the date must be specific and can	. (OPTIONAL) not be more than five days prior or 90 days after the
	incerted in this block does not meet the applicab	le statutory filing requirements, this date will not be listed as
	fective date on the Department of State's records	
		ss for the above stated corporation at the place designated in
this certificate, I a	m familiar with and accept the appointment as t	egistered agent and agree to act in this capacity
		Fcb. 25, 2019
	Required Signature/Registered Agent James Schab	Feb. 25, 2019
I submit this document to the D	iment and affirm that the facts stated herein at epartment of State constitutes a third degree fel	re true. I am aware that the false information submitted in a ony as provided for in s.817.155, F.S.
	The state of the s	Fab 25 2010
•	ed Signature Incorporator	Feb. 25, 2019 Date
	Tampa Schah	